

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	D.P.	XDC	11-20-00
O.I.P.E. CLASSIFIER	PD	0173-0	11-20-00
FORMALITY REVIEW			11-20-00

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral) Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 0 ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
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